ā	Before	DKA	diabetic ketoacidosis
AAA	abdominal aortic aneurysm	DOA	dead on arrival
Abd	abdomen	DOE	dyspnea on exertion
ACS	acute coronary syndrome	DM	diabetes mellitus
AED	automatic external defibrillator	d/t	due to
AHA	American Heart Association	dx	diagnosis
AIDS	acquired immune deficiency syndrome	EBL	estimated blood loss
ALOC	altered level of consciousness	ED	emergency department
ALS	advanced life support	e.g.	for example
AMA	against medical advice	ECG	electrocardiogram
AMI	Acute myocardial infarction	epi	epinephrine
Amp	ampule	ET	endotracheal
Amt	amount	eval	evaluation
Ant	anterior	exam	examination
Approx	Approximately	F°	Fahrenheit
ARC	AIDS related complex	FB	foreign body
ASAP	as soon as possible	freq	frequency
ASHD	arteriosclerotic heart disease	Fx	fracture
BBB	bundle branch block	GI	gastrointestinal
BLS	basic life support	gm	gram
BP	blood pressure	GSW	gunshot wound
BS	blood sugar	gtts	drops
BS	breath sounds	hr	hour
c	with	Hep A	Hepatitis A (HAV)
C°	Celsius	Hep B	Hepatitis B (HBV)
CA	cancer	Hep C	Hepatitis C (HCV)
CABG	coronary artery bypass graft	HHN	hand held nebulizer
CAD	coronary artery disease	HIV	human immunodeficiency virus
Cath	catheter	H&P	history and physical exam
cc	cubic centimeter	HPI	history of present illness
CC	chief complaint	HTN	hypertension
Chemo	chemotherapy	Hx	history
CHF	congestive heart failure	IDDM	Insulin dependent diabetes mellitus
Cl	chloride	IM	Intramuscular
cm	centimeter	incr	increasing
CNS	central nervous system	inf	inferior
c/o	complaining of	IO	intraosseous
COPD	chronic obstructive pulmonary disease	IV	intravenous
CPR	Cardiopulmonary resuscitation	JVD	jugular vein distention
CRT	capillary refill time	kg	kilogram
c-section	Cesarean section	(L)	left
c-spine	cervical spine	lac	laceration
CSF	cerebrospinal fluid	lat	lateral
CSM	circulation, sensation, movement	lb	pound
CVA	cerebrovascular accident	LMP	last menstrual period
D&C	dilatation & curettage	LOC	level of consciousness
d/c	discontinue	loc	loss of consciousness
dec	decreased		

L-spine	lumbar spine	pt.	patient
MAST	military anti-shock trousers	PTA	prior to arrival
max	maximum	PVC	premature ventricular contraction
mcg	microgram	q	every
MD	medical doctor	R	respirations
mg	milligram	rt	right
MI	myocardial infarction	®	right
misc	miscellaneous	R/O	rule out
ml	milliliter	Rx	treatment
mm	millimeter	s	without
mod	moderate	SIDS	sudden infant death syndrome
mos	months	sig.	significant
N/A	not applicable	SL	sublingual
NAD	no acute distress	SOB	shortness of breath
neg	negative	SOC	standard of care
NG	nasogastric	SPS	standard for practical skill
NIDDM	non-insulin dependent diabetes mellitus	SQ	subcutaneous
NKA	no known allergies	subQ	subcutaneous
no.	number	S/Sx	signs and symptoms
NPO	nothing by mouth	stat	immediately
NSR	normal sinus rhythm	Sx	symptom
NTG	nitroglycerin	temp	temperature
N&V	nausea and vomiting	TB	tuberculosis
occ	occasional	TBSA	total body surface area
Oriented X3	oriented to time, place, person	TKO	to keep open
os	mouth	Tx	transport
oz	ounce	unk	unknown
p	after	URI	upper respiratory infection
P	pulse	VT	Ventricular tachycardia
PAC	premature atrial complex	VF	ventricular fibrillation
PAD	public access defibrillation	VS	vital signs
PASG	pneumatic anti-shock garment	w/	with
palp	palpation	w/o	without
PE	physical examination	WO	wide open
PE	pulmonary edema	y/o	year old
PE	pulmonary embolus	♂	male
PERL	pupils equal, reactive to light	♀	female
PJC	premature junctional contraction	↑	increased, improved
PMD	private (Personal)medical doctor	↓	decreased, worsened
PMH	past medical history	∅	none
PNB	pulseless non-breather	>	greater than
PND	paroxysmal nocturnal dyspnea	<	less than
POC	position of comfort		
pos	positive		
PP	policy/procedure		
PRN	as necessary		